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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF GEORGIA	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture	Vickie First name Elaine Middle name		First name Middle name
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	_	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	Vickie Boyd Poole		
	Include your married or maiden names.	Vickie Boyd Millwood		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6048		

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Case number (if known)

Debtor 1 Vickie Elaine Boyd

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Business name(s) Business name(s) Include trade names and doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 115 White Park PI Apt R9 Dallas, GA 30132 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code **Paulding** County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Vickie Elaine Boyd

Case number (if known)

Bankruptcy Code you are choosing to file under Chapter 7 Chapter 11 Chapter 12 Chapter 13 B. How you will pay the fee I will pay the entire fee when I file my petition. about how you may pay. Typically, if you are paying order. If your attorney is submitting your payment a pre-printed address. I need to pay the fee in installments. If you chon The Filing Fee in Installments (Official Form 103A) I request that my fee be waived (You may requed but is not required to, waive your fee, and may do applies to your family size and you are unable to the Application to Have the Chapter 7 Filing Fee to the Application to Have the Chapter 1 Filing Fee to the Application to Have the Chapter 1 Filing Fee to the Application to Have the Chapter	Please check with the clerk's office in your local court for more details ag the fee yourself, you may pay with cash, cashier's check, or money on your behalf, your attorney may pay with a credit card or check with use this option, sign and attach the Application for Individuals to Pay
Chapter 7 Chapter 11 Chapter 12 Chapter 13 I will pay the entire fee when I file my petition. about how you may pay. Typically, if you are pay order. If your attorney is submitting your payment a pre-printed address. I need to pay the fee in installments. If you chon The Filing Fee in Installments (Official Form 103A) I request that my fee be waived (You may request but is not required to, waive your fee, and may do applies to your family size and you are unable to the Application to Have the Chapter 7 Filing Fee to the Application to Have the Chapter 8 Fee to the Application to Have the Chapter 8 Fee to the Application to Have the Chapter 8 Fee to the Application to Have the Chapter 9 Fee to the Application to Have the Chapter 9 Fee to the Application to Have the Chapter 9 Fee to the Application to Have the Chapter 9 Fee to the Application to Have the Chapter 9 Fee to the Application to the Application to the Application to the Appli	ng the fee yourself, you may pay with cash, cashier's check, or money on your behalf, your attorney may pay with a credit card or check with use this option, sign and attach the <i>Application for Individuals to Pay</i> of this option only if you are filing for Chapter 7. By law, a judge may, so only if your income is less than 150% of the official poverty line that that you the fee in installments). If you choose this option, you must fill out
Chapter 12 Chapter 13 Chapter 13	ng the fee yourself, you may pay with cash, cashier's check, or money on your behalf, your attorney may pay with a credit card or check with use this option, sign and attach the <i>Application for Individuals to Pay</i> of this option only if you are filing for Chapter 7. By law, a judge may, so only if your income is less than 150% of the official poverty line that that you the fee in installments). If you choose this option, you must fill out
B. How you will pay the fee I will pay the entire fee when I file my petition. about how you may pay. Typically, if you are paying order. If your attorney is submitting your payment a pre-printed address. I need to pay the fee in installments. If you chow the Filing Fee in Installments (Official Form 103A) I request that my fee be waived (You may request but is not required to, waive your fee, and may do applies to your family size and you are unable to the Application to Have the Chapter 7 Filing Fee Installments (Pee Installments) No. District District Whe No. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor District Whe	ng the fee yourself, you may pay with cash, cashier's check, or money on your behalf, your attorney may pay with a credit card or check with use this option, sign and attach the <i>Application for Individuals to Pay</i> of this option only if you are filing for Chapter 7. By law, a judge may, so only if your income is less than 150% of the official poverty line that that you the fee in installments). If you choose this option, you must fill out
B. How you will pay the fee I will pay the entire fee when I file my petition. about how you may pay. Typically, if you are payi order. If your attorney is submitting your payment a pre-printed address. I need to pay the fee in installments. If you chon The Filing Fee in Installments (Official Form 103A) I request that my fee be waived (You may requed but is not required to, waive your fee, and may do applies to your family size and you are unable to the Application to Have the Chapter 7 Filing Fee to the Application to Have	ng the fee yourself, you may pay with cash, cashier's check, or money on your behalf, your attorney may pay with a credit card or check with use this option, sign and attach the <i>Application for Individuals to Pay</i> of this option only if you are filing for Chapter 7. By law, a judge may, so only if your income is less than 150% of the official poverty line that that you the fee in installments). If you choose this option, you must fill out
B. How you will pay the fee I will pay the entire fee when I file my petition. about how you may pay. Typically, if you are payi order. If your attorney is submitting your payment a pre-printed address. I need to pay the fee in installments. If you chon The Filing Fee in Installments (Official Form 103A) I request that my fee be waived (You may requed but is not required to, waive your fee, and may do applies to your family size and you are unable to the Application to Have the Chapter 7 Filing Fee to the Application to Have	ng the fee yourself, you may pay with cash, cashier's check, or money on your behalf, your attorney may pay with a credit card or check with use this option, sign and attach the <i>Application for Individuals to Pay</i> of this option only if you are filing for Chapter 7. By law, a judge may, so only if your income is less than 150% of the official poverty line that that you the fee in installments). If you choose this option, you must fill out
about how you may pay. Typically, if you are payi order. If your attorney is submitting your payment a pre-printed address. I need to pay the fee in installments. If you chon The Filing Fee in Installments (Official Form 103A I request that my fee be waived (You may reque but is not required to, waive your fee, and may do applies to your family size and you are unable to the Application to Have the Chapter 7 Filing Fee in the	ng the fee yourself, you may pay with cash, cashier's check, or money on your behalf, your attorney may pay with a credit card or check with use this option, sign and attach the <i>Application for Individuals to Pay</i> of this option only if you are filing for Chapter 7. By law, a judge may, so only if your income is less than 150% of the official poverty line that that you the fee in installments). If you choose this option, you must fill out
The Filing Fee in Installments (Official Form 103A request that my fee be waived (You may request to your fee, and may do applies to your family size and you are unable to the Application to Have the Chapter 7 Filing Fee to the Application to the	st this option only if you are filing for Chapter 7. By law, a judge may, so only if your income is less than 150% of the official poverty line that bay the fee in installments). If you choose this option, you must fill out
I request that my fee be waived (You may request but is not required to, waive your fee, and may do applies to your family size and you are unable to the Application to Have the Chapter 7 Filing Fee to the Application to the Application to Have the Chapter 7 Filing Fee to the Application to the	st this option only if you are filing for Chapter 7. By law, a judge may, so only if your income is less than 150% of the official poverty line that ay the fee in installments). If you choose this option, you must fill out
but is not required to, waive your fee, and may do applies to your family size and you are unable to the Application to Have the Chapter 7 Filing Fee of the Application to Ha	so only if your income is less than 150% of the official poverty line that pay the fee in installments). If you choose this option, you must fill out
bankruptcy within the last 8 years? District District Whe District Whe No cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor District Whe No Debtor District Whe	
District Whe District Whe District Whe Whe District Whe Whe Whe District Whe Whe Whe Whe District Whe Whe Whe District Whe Whe District Whe Whe Whe District Whe Whe District Whe Whe Whe District District Whe Whe Whe District Whe Whe Whe District Whe Whe Whe District Whe Whe Whe District Whe Whe Whe District Whe Whe District Whe Whe Whe District Whe Whe District Whe Whe Whe District Whe Whe District Whe Whe District Whe Whe Whe Whe District Whe	
District Whe District Whe No Cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? District Whe No Debtor District Whe	Case number
District District District No Cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor District Whe	
cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor District Whe	
cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor District Whe	
not filing this case with you, or by a business partner, or by an affiliate? Debtor District Whe	
District Whe	
	Relationship to you
D 1 (Case number, if known
Debtor	Relationship to you
District Whe	Case number, if known
11. Do you rent your	
residence? ■ Yes. Has your landlord obtained an eviction judg	ment against you?
■ No. Go to line 12.	
Yes. Fill out <i>Initial Statement About</i> bankruptcy petition.	an Eviction Judgment Against You (Form 101A) and file it with this

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Debtor 1 Vickie Elaine Boyd Case number (if known)

Part	3: Report About Any Bu	sinesses `	You Own	as a Sole Proprieto	or					
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.						
		☐ Yes.	Name	and location of busin	ness					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any						
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code							
	it to this petition.		Check	the appropriate box	to describe your business:					
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))					
				Single Asset Real E	Estate (as defined in 11 U.S.C. § 101(51B))					
				Stockbroker (as def	fined in 11 U.S.C. § 101(53A))					
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))					
				None of the above						
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you in s, cash-fl .C. 1116(ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure						
	For a definition of small	No.	ı am n	ot filing under Chapte	erii.					
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.						
		☐ Yes.	I am fi	ling under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.					
Part	4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention					
14.	Do you own or have any	■ No.								
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is t	he hazard?						
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?						
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	Number, Street, City, State & Zip Code					
				7	Number, Street, City, State & Zip Code					

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Debtor 1 Vickie Elaine Boyd

Case number (if known)

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 Vickie Elaine Boyd Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under □ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000** □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Vickie Elaine Boyd Signature of Debtor 2 Vickie Elaine Boyd Signature of Debtor 1 Executed on April 30, 2019 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Vickie Elaine Boyd

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jeffrey B. Kelly	Date	April 30, 2019
Signature of Attorney for Debtor	_	MM / DD / YYYY
Jeffrey B. Kelly 412798		
Printed name		
Law Office of Jeffrey B. Kelly, P.C.		
Firm name		
107 E. 5th Avenue		
Rome, GA 30161		
Number, Street, City, State & ZIP Code		
Contact phone 678-861-1127	Email address	lawoffice@kellycanhelp.com
412798 GA		
Bar number & State		

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Fil	l in this inforn	nation to identify you	r case:			
De	btor 1	Vickie Elaine Bo	yd Middle Name	Loot Name		
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name Last Name		
Un	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF GEORGIA		
Ca	se number					
(if k	nown)					theck if this is an mended filing
St		of Financial	Affairs for Individ			4/19
info	rmation. If m		attach a separate sheet to		equally responsible for sup additional pages, write you	
Pa			rital Status and Where You	Lived Before		
1.	_	r current marital statu	IS?			
	■ Married■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territory co, Texas, Washington and W	
	■ No					
	☐ Yes. Ma	ke sure you fill out Sch	nedule H: Your Codebtors (Of	ficial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No ■ Yes Fill	in the details.				
	. 55. 1 111	a.o dotano.	Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	•	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$9,865.00	☐ Wages, commissions, bonuses, tips	and excitations;
			☐ Operating a business		☐ Operating a business	

Official Form 107

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				Debtor 1					Debtor 2		
					of income that apply.	(be	oss income fore deductions and lusions)		Sources of inco Check all that ap		Gross income (before deductions and exclusions)
	or last calen anuary 1 to		31, 2018)	■ Wages bonuses,	s, commissions, tips		\$26,000.0		☐ Wages, componuses, tips	missions,	
				☐ Operat	ting a business			ļ	☐ Operating a b	ousiness	
	or the calen anuary 1 to			■ Wages bonuses,	s, commissions, tips		\$26,000.0		☐ Wages, comi	missions,	
				☐ Opera	ting a business			l	Operating a l	ousiness	
5.	Include include and other winnings. List each s	come regard public bene If you are fil	dless of whet fit payments; ing a joint ca the gross inc	ner that inco pensions; re se and you h	me is taxable. Ex ental income; inte nave income that	camples erest; di you red		re alim llected it only	I from lawsuits; I once under De	royalties; and btor 1.	ecurity, unemployment, d gambling and lottery
	□ 163.	i iii iii tiie ut	stalis.								
				Debtor 1					Debtor 2		
				Sources of Describe b	of income pelow.	eac (be	ess income from th source fore deductions and lusions)		Sources of inco Describe below.		Gross income (before deductions and exclusions)
Pa	rt 3: List	Certain Pa	ayments You	Made Befo	re You Filed for	Bankr	uptcy				
6.	Are either	Neither D individual During the No. Yes	ebtor 1 nor I primarily for a 90 days before Go to line 7 List below paid that control include	Debtor 2 had a personal, for eyou filed 7. each creditor. Do no payments to	amily, or househor for bankruptcy, d r to whom you pa ot include payme o an attorney for t	did you aid a totents for this bar	lebts. Consumer de lose." pay any creditor a to al of \$6,825* or mod domestic support of	otal of re in c	\$6,825* or more one or more pay	e? ments and th ild support ar	nd alimony. Also, do
	■ Yes.				e primarily const for bankruptcy, d		ebts. pay any creditor a to	otal of	\$600 or more?		
		■ No.	Go to line	7 .							
		☐ Yes	include pay		omestic support o		al of \$600 or more a				creditor. Do not noclude payments to an
	Creditor	s Name an	d Address		Dates of payme	ent	Total amount paid		Amount you still owe	Was this p	ayment for
7.	Insiders in of which y a business alimony.	iclude your ou are an o s you opera	relatives; any fficer, directo	general par r, person in o roprietor. 11	tners; relatives of control, or owner	f any ge of 20%		tnersh ting se	ips of which you ecurities; and an	u are a gener y managing	ral partner; corporation agent, including one fo
		Name and			Dates of payme	ont	Total amount		Amount you	Reason for	r this payment
~			Audiess	2			paid		Amount you still owe	11645011 10	
Offi	cial Form 107			Statem	ent of Financial Af	tairs fo	Individuals Filing fo	or Banl	kruptcy		page

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Case number (if known) Document

Debtor 1 Vickie Elaine Boyd

	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	this payment
	Greg Boyd 152 McEvers Landing Acworth, GA 30101	February 2018	\$400.00	\$0.00		er back for the e put on her
	Leah Boyd	March 2019	\$250.00	\$0.00	for buying	aid sister-in-law debtor a new sses after hers ged in an
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a de	bt that benefited an
	■ No					
	Yes. List all payments to an insider Insider's Name and Address	Dates of navement	Total amount	A manuat wan	Doggen for t	ihia naumant
	insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Include credit	t his payment tor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	cases, small claims actions	s, divorces, collectic	on suits, paternity a	ctions, support	or custody
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below No. Go to line 11.		erty repossessed, f	foreclosed, garnis	shed, attached	, seized, or levied?
	Yes. Fill in the information below. Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened	1			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.	otcy, did any creditor, inc		nancial institution	ı, set off any aı	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankruptocourt-appointed receiver, a custodian, or a		erty in the possess			fit of creditors, a
	■ No □ Yes					

Page 11 of 59
Case number (if known) Document Debtor 1 Vickie Elaine Boyd

Pai	t 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	y, did you give any gifts with a to	otal value of more than \$600 per persor	n?				
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or con		ibutions with a total value of more than	n \$600 to any charity?				
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contribu	ted Dates you contributed	Value				
Pai	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankruptor gambling? No Yes. Fill in the details.	or since you filed for bankruptc	y, did you lose anything because of the	eft, fire, other disaster,				
	how the loss occurred	scribe any insurance coverage foude the amount that insurance has urance claims on line 33 of Schedu	paid. List pending loss	Value of property lost				
Pai	t 7: List Certain Payments or Transfers							
16.	Within 1 year before you filed for bankrupto consulted about seeking bankruptcy or pre include any attorneys, bankruptcy petition pre	aring a bankruptcy petition?		erty to anyone you				
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of an transferred	y property Date payment or transfer was made	Amount of payment				
	Law Office of Jeffrey B. Kelly 107 E. Fifth Avenue Rome, GA 30161	\$600 to file chapter 7 (\$3 \$20 credit counseling co financial management coattorney's fees)	urse, \$20	\$600.00				
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.							
	Yes. Fill in the details.	December 1						
	Person Who Was Paid Address	Description and value of an transferred	y property Date payment or transfer was made	Amount of payment				

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Debtor 1 Vickie Elaine Boyd

18.	Within 2 years before you filed for bankruptor transferred in the ordinary course of your burnclude both outright transfers and transfers made include gifts and transfers that you have already	siness or financial affa de as security (such as the	irs? he granting of a s					
	No Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and vo			any property or s received or debts	Date transfer was made		
	Person's relationship to you				.			
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-protein No		y property to a s	elf-settled tr	ust or similar device	of which you are a		
	Yes. Fill in the details.							
	Name of trust	Description and va	alue of the prope	erty transfer	red	Date Transfer was made		
Par	rt 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Stor	rage Units				
20.		, were any financial acc	counts or instru	ments held i	n your name, or for yo	our benefit, closed,		
	sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No							
	☐ Yes. Fill in the details.							
		Last 4 digits of account number	Type of accour instrument	cle m	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, any	safe depos	it box or other deposi	itory for securities,		
	No							
	Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?		
22.	Have you stored property in a storage unit or	place other than your	home within 1 y	ear before y	ou filed for bankrupto	ey?		
	■ No							
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	to it? Address (Number, Street, City,		contents	Do you still have it?		
Par	rt 9: Identify Property You Hold or Control fo	or Someone Else						
23.			ide any property	you borrow	ed from, are storing f	or, or hold in trust		
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		Describe the	property	Value		
Par	rt 10: Give Details About Environmental Infor	rmation						

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Official Form 107

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Debtor 1 Vickie Elaine Boyd

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

regulations controlling the cleanup of these substances, wastes, or material.

Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Date of not know it No No Yes. Fill in the details.		nazardous material, poliutant, contaminant, or similar term.										
No Yes, Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Case Title Case Number Case Number Address (Number, Street, City, State and ZIP Code) Addres	Rep	ort all notices, releases, and p	roceedings that yo	ou know about, regardless of when	n the	y occurred.						
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)	24.	24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?										
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Address (Number, Street, City, State and ZIP Code) Part 11: Sive Details About Your Business or Connections to Any Business Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper No Yes. Fill in the details below. Name Address Date Issued Address Date Issued		_										
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code)				Address (Number, Street, City, State and			Date of notice					
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the ca	25.	Have you notified any govern	Have you notified any governmental unit of any release of hazardous material?									
Address (Number, Street, City, State and ZIP Code) Address (Number, S		_										
■ No			e and ZIP Code)	Address (Number, Street, City, State an	d		Date of notice					
Yes. Fill in the details. Case Title Case Number	26.	Have you been a party in any	judicial or adminis	strative proceeding under any envi	ironn	nental law? Include settlements a	nd orders.					
Case Number Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address Name of accountant or bookkeeper Describe the nature of the business Name of accountant or bookkeeper Dates business existed No Yes. Fill in the details below. Name Address Date Issued Address												
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name				Name Address (Number, Street, City,	Nat	ture of the case	Status of the case					
□ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address Describe the nature of the business Name Address Name of accountant or bookkeeper Do not include Social Security number or ITI Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No □ Yes. Fill in the details below. Name Address	Par	t 11: Give Details About You	r Business or Con	nections to Any Business								
□ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Describe the nature of the business Po not include Social Security number or ITI Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ■ No ■ No Yes. Fill in the details below. Name Address Date Issued	27.	Within 4 years before you file	d for bankruptcy, o	did you own a business or have ar	ny of	the following connections to any	business?					
□ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Date Issued Date Issued Date Issued		☐ A sole proprietor or se	elf-employed in a t	rade, profession, or other activity,	eith	er full-time or part-time						
□ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Employer Identification number Do not include Social Security number or ITI Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No □ Yes. Fill in the details below. Name Address Date Issued		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)										
□ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. Name Address Date Issued		☐ A partner in a partner	ship									
No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper No Yes. Fill in the details below. Describe the nature of the business Name Address Name Address Describe the nature of the business Name Address Employer Identification number Do not include Social Security number or ITI Dates business existed Dates business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? Include all financial statement to anyone about your business? No Date Issued		☐ An officer, director, or	r managing execut	ive of a corporation								
Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Date Issued Date Issued		☐ An owner of at least 5	% of the voting or	equity securities of a corporation								
Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Describe the nature of the business Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Date Issued Date Issued		■ No. None of the above ap	oplies. Go to Part	12.								
Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address Do not include Social Security number or ITI Dates business existed Date Issued		☐ Yes. Check all that apply	above and fill in tl	he details below for each business	s.							
Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address Date Issued			De	scribe the nature of the business								
institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. Name Address			ode) Na	me of accountant or bookkeeper		·						
☐ Yes. Fill in the details below. Name Address Date Issued	28.			to an	yone about your business? Inclu	de all financial						
Name Date Issued Address		_	low									
		Name Address	Da	te Issued								

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 19-40997-bem Doc 1 Filed 04/30/19 Entered 04/30/19 09:32:06 Desc Main Page 14 of 59 Case number (if known) Document

Debtor 1 Vickie Elaine Boyd

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Vickie Elaine Boyd Signature of Debtor 2 Vickie Elaine Boyd Signature of Debtor 1 Date Date April 30, 2019 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in 1	this infor	mation to identify your ca	Document se and this filing:	Page 15 01 59		
Debtor	'	Vickie Elaine Boyd First Name	Middle Name	Last Name		
Debtor	_					
(Spouse,	if filing)	First Name	Middle Name	Last Name		
United	States Ba	ankruptcy Court for the: N	ORTHERN DISTRICT OF GE	ORGIA		
Case n	number					☐ Check if this is an
	-			- 		amended filing
Offic	ial Fo	orm 106A/B				
_		le A/B: Prope	rtv.			40/45
						12/15
hink it f	its best. I	Be as complete and accurate a	ems. List an asset only once. If as possible. If two married peop	le are filing together, both a	re equally responsible for su	pplying correct
	tion. If mo every que		eparate sheet to this form. On t	he top of any additional pag	es, write your name and case	number (if known).
Part 1:	Describe	e Each Residence, Building, L	and, or Other Real Estate You O	wn or Have an Interest In		
1. Do y o	ou own or	have any legal or equitable in	terest in any residence, building	g, land, or similar property?		
■ No	o. Go to Pa	urt O				
_		is the property?				
□ 16	s. Where	is the property?				
Part 2:	Describe	Your Vehicles				
Da	aum las	oo or hove lovel or onvite	ble interest in any vehicles	whather they are regist.	ared or mot? Include accord	history and that
			able interest in any vehicles, also report it on <i>Schedule G: l</i>			nicles you own that
	. vono 1	vuolen trantara annut utilit	·	ŕ	,	
o. Cars	s, vans, ti	rucks, tractors, sport utilit	y venicies, motorcycles			
	0					
■ Ye	es					
3.1	Make:	Chevy	Who has an interest in t	he property? Check one	Do not deduct secured cla the amount of any secure	
	Model:	Tahoe	Debtor 1 only		Creditors Who Have Clair	
	Year:	2003	Debtor 2 only		Current value of the	Current value of the
	Approxima Other infor	te mileage: 345,00			entire property?	portion you own?
Г	Other into	mation.	At least one of the deb	itors and another		
			☐ Check if this is comm	nunity property	\$3,700.00	\$3,700.00
			(see instructions)			
					De wet de doot ee come de de	dana an anna dana Dat
3.2	Make:	Hyundai	Who has an interest in t	he property? Check one	Do not deduct secured cla the amount of any secure	d claims on Schedule D:
	Model:	Sonata	Debtor 1 only		Creditors Who Have Clair	ns Secured by Property.
	Year:	2005 ate mileage: 150,00	Debtor 2 only		Current value of the	Current value of the
	Approxima Other infor	- <u> </u>	Debtor 1 and Debtor 2 At least one of the deb	•	entire property?	portion you own?
Г	24107 111101		At least one of the det	iois and anomer		
			☐ Check if this is comm	nunity property	\$2,000.00	\$2,000.00
			(see instructions)			

Official Form 106A/B Schedule A/B: Property page 1

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Debtor 1 V	ickie Elaine Boyd	Ca	se number (if known)	
3.3 Make:	Mitsubishi Outlander Sport	Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any secure	laims or exemptions. Put ed claims on Schedule D:
Model: Year:	2014			ims Secured by Property.
	mate mileage:	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	formation:		chine property:	portion you own.
Other in	iormation:	At least one of the debtors and another		
		Check if this is community property (see instructions)	\$7,500.00	\$7,500.00
		/s and other recreational vehicles, other vehicles, and al watercraft, fishing vessels, snowmobiles, motorcycle a		
		u own for all of your entries from Part 2, including an /rite that number here		\$13,200.00
Part 3: Descri	be Your Personal and Househ	old Items		
o you own o	or have any legal or equitab	le interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	goods and furnishings Major appliances, furniture, li	nens, china, kitchenware		
Yes. De	escribe			
	Household	Items (no single item over \$300)		\$2,400.0
	Televisions and radios; audio including cell phones, camer	o, video, stereo, and digital equipment; computers, printer as, media players, games	rs, scanners; music collecti	ions; electronic devices
_		ings, prints, or other artwork; books, pictures, or other art a, collectibles	objects; stamp, coin, or ba	seball card collections;
■ No	a a a rib a			
☐ Yes. De	escribe			
	for sports and hobbies Sports, photographic, exercis musical instruments	se, and other hobby equipment; bicycles, pool tables, golf	f clubs, skis; canoes and ka	ayaks; carpentry tools;
■ No				
☐ Yes. De	escribe			
). Firearms Examples	a: Pistols, rifles, shotguns, am	munition, and related equipment		
■ No				
☐ Yes. De	escribe			
I. Clothes Examples □ No	:: Everyday clothes, furs, leath	ner coats, designer wear, shoes, accessories		
Yes. De	escribe			
	-			
	Clothes			\$100.0

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known)

	January.		
2.	Jewelry Examples: Everyday jewelry, costume jewelry, engageme	nt rings, wedding rings, heirloom jewelry, watches, gems, o	nold silver
	□ No	The finige, wedding finige, flemborn jewelly, wateries, gerne, g	gola, oliver
	Yes. Describe		
	— 163. Describe		
	Jewelry		\$100.00
	<u>'</u>	·	
13.	Non-farm animals		
٠٠.	Examples: Dogs, cats, birds, horses		
	■ No		
	☐ Yes. Describe		
	Any other personal and beyonhald from you did not a	the part list in a luding part health side year did not list	
	Any other personal and household items you did not a	ilready list, including any nealth alds you did not list	
	No		
	☐ Yes. Give specific information		
15	Add the dollar value of all of your entries from Part 3,		\$2,600.00
	for Part 3. Write that number here		
Pa	rt 4: Describe Your Financial Assets		
Do	you own or have any legal or equitable interest in any	of the following?	Current value of the
			portion you own? Do not deduct secured
			claims or exemptions.
			·
6.	Cash Evamples: Manay you have in your wallet in your hame i	in a cofe deposit have and an hand when you file your natiti	on
	□ No	n a safe deposit box, and on hand when you file your petiti	OII
	■ Yes		
	— 163		
		Cash	\$6.00
7	Deposits of money		
٠.		; certificates of deposit; shares in credit unions, brokerage l	nouses, and other similar
	institutions. If you have multiple accounts with	the same institution, list each.	
	□ No	1. 20. 2	
	Yes	Institution name:	
	17.1. Checking	Bank of America	\$145.00
_			
8.	Bonds, mutual funds, or publicly traded stocks		
	Examples: Bond funds, investment accounts with brokera	ge firms, money market accounts	
	■ No		
	☐ Yes Institution or issuer name	: :	
۵	Non-publicly traded stock and interests in incorporate	d and unincornorated businesses including an interes	t in an LLC nartnership and
υ.	joint venture	a and difficorporated businesses, including an interes	till all EEO, partilership, and
	■ No		
	☐ Yes. Give specific information about them		
	Name of entity:	% of ownership:	
	Covernment and cornerate hands and other respectable	o and non negotiable instruments	
٤υ.	Government and corporate bonds and other negotiable Negotiable instruments include personal checks, cashiers		
	Non-negotiable instruments are those you cannot transfer		
	■ No		
	☐ Yes. Give specific information about them		
	Issuer name:		

Official Form 106A/B Schedule A/B: Property page 3

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_	VIORIO LIGII	no Boya			
21	Retirement or pension Examples: Interests in		ı, 403(b), thrift savings accou	unts, or other pension or prof	iit-sharing plans
	Yes. List each accou	unt separately. Type of account:	Institution name:		
		403(b)	State of Georgia	a	\$11,000.00
22	Examples: Agreemen	sed deposits you have made		ervice or use from a company is, water), telecommunication	
	■ No □ Yes		Institution name or	individual:	
23	_ `	for a periodic payment of mo	oney to you, either for life or f	for a number of years)	
	■ No □ Yes	Issuer name and description			
24		tion IRA, in an account in a , 529A(b), and 529(b)(1).	qualified ABLE program,	or under a qualified state t	uition program.
		Institution name and descript	tion. Separately file the recor	rds of any interests.11 U.S.C	. § 521(c):
25	■ No		(other than anything listed	d in line 1), and rights or po	owers exercisable for your benefit
	·	nformation about them			
26			and other intellectual propeeds from royalties and licer		
		nformation about them			
27		, and other general intangi ermits, exclusive licenses, co		ngs, liquor licenses, professio	onal licenses
	_	nformation about them			
M	oney or property owed	I to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28	. Tax refunds owed to	you			
	■ No				
	Yes. Give specific in	iformation about them, includ	ling whether you already filed	d the returns and the tax yea	ars
29	Family support Examples: Past due o	or lump sum alimony, spousa	ıl support, child support, mair	ntenance, divorce settlement	t, property settlement
	Yes. Give specific in	formation			
30	benefits; u		ments, disability benefits, sid	ck pay, vacation pay, worke	rs' compensation, Social Security
	■ No□ Yes. Give specific in	nformation			
31	Interests in insurance Examples: Health, dis	e policies	Ith savings account (HSA); c	credit, homeowner's, or rente	er's insurance
	■ No □ Yes. Name the insur	rance company of each polic Company name:	y and list its value.	Beneficiary:	Surrender or refund
Off	ficial Form 106A/B	1 . 7	Schedule A/B: Property	·	page

Document Page 19 of 59 Vickie Elaine Boyd Case number (if known) Debtor 1 value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ☐ No ■ Yes. Give specific information.. \$23,000.00 Back Owed Child Support 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$34,151.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership

No. Go to Part 7. ☐ Yes. Go to line 47.

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

Describe All Property You Own or Have an Interest in That You Did Not List Above

\$0.00

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known) Debtor 1 Vickie Elaine Boyd List the Totals of Each Part of this Form Part 8: Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$13,200.00 57. Part 3: Total personal and household items, line 15 \$2,600.00 Part 4: Total financial assets, line 36 58. \$34,151.00 Part 5: Total business-related property, line 45 59. \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00

\$49,951.00

Copy personal property total

63. Total of all property on Schedule A/B. Add line 55 + line 62

Total personal property. Add lines 56 through 61...

61.

\$49,951.00

\$49,951.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	mation to identify your	case:		
Debtor 1	Vickie Elaine Boy	rd .		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF GEORGIA	
Case number (if known)				☐ Check if this is an
(·· ····2 ····)				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Ide	entify the	Property You	u Claim as	Exempt
-------------	------------	--------------	------------	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
\$3,700.00		\$3,700.00	O.C.G.A. § 44-13-100(a)(3)
		100% of fair market value, up to any applicable statutory limit	
\$2,000.00		\$1,300.00	O.C.G.A. § 44-13-100(a)(3)
		100% of fair market value, up to any applicable statutory limit	
\$2,000.00		\$700.00	O.C.G.A. § 44-13-100(a)(6)
		100% of fair market value, up to any applicable statutory limit	
\$2,400.00	•	\$2,400.00	O.C.G.A. § 44-13-100(a)(4)
		100% of fair market value, up to any applicable statutory limit	
\$100.00	•	\$100.00	O.C.G.A. § 44-13-100(a)(4)
		100% of fair market value, up to	
	\$2,000.00 \$2,400.00	\$2,000.00 \$2,000.00 \$2,000.00 \$2,000.00	\$3,700.00 \$3,700.00 \$1,00% of fair market value, up to any applicable statutory limit \$2,000.00 \$1,00% of fair market value, up to any applicable statutory limit \$2,000.00 \$1,00% of fair market value, up to any applicable statutory limit \$2,000.00 \$1,00% of fair market value, up to any applicable statutory limit \$2,400.00 \$2,400.00 \$2,400.00 \$1,00% of fair market value, up to any applicable statutory limit \$2,400.00 \$1,00% of fair market value, up to any applicable statutory limit \$2,400.00 \$1,00% of fair market value, up to any applicable statutory limit

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Case number (if known)

				,	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00	O.C.G.A. § 44-13-100(a)(5)
	Zino nom concedero 705. 1211			100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$6.00		\$6.00	O.C.G.A. § 44-13-100(a)(6)
!	Line Horr Scredule A/B. 19.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Bank of America Line from Schedule A/B: 17.1	\$145.00		\$145.00	O.C.G.A. § 44-13-100(a)(6)
LII	Line from Scriedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
	403(b): State of Georgia Line from Schedule A/B: 21.1	\$11,000.00		\$11,000.00	O.C.G.A. § 18-4-22
	Line Hotti Schedule Arb. 21.1			100% of fair market value, up to any applicable statutory limit	
	Back Owed Child Support Line from Schedule A/B: 35.1	\$23,000.00		\$10,349.00	O.C.G.A. § 44-13-100(a)(6)
	Line Hotti Schedule A/B. 33.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every			led on or after the date of adjustme	nt.)
	■ No				
	Yes. Did you acquire the property cover	red by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No				
	□ Yes				

			Document Page 23	01 59		
	in this information	n to identify you	ur case:			
Deb		ickie Elaine B	oyd			
	Fi	irst Name	Middle Name Last Name			
	otor 2		Million I			
(Spo	use if, filing) Fi	irst Name	Middle Name Last Name			
Unit	ted States Bankru	otcy Court for the	: NORTHERN DISTRICT OF GEORGIA			
Cas	se number					
(if kn	own)				☐ Check	if this is an
					ameno	led filing
~ · ·		000				
<u>Jtt</u>	icial Form 10	<u> 16D</u>				
Sc	hedule D:	Creditors	Who Have Claims Secured	by Propert	У	12/15
s ne			If two married people are filing together, both are equ out, number the entries, and attach it to this form. On			
I. Do	any creditors have	claims secured b	y your property?			
	■ No. Check this	box and submit t	his form to the court with your other schedules. You	u have nothing else t	o report on this form.	
	Yes. Fill in all of	of the information	below.			
Dar		cured Claims				
	<u> </u>			Column A	Column B	Column C
for e	each claim. If more the	han one creditor has	more than one secured claim, list the creditor separately s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Chase Auto F	inance	Describe the property that secures the claim:	\$7,491.00	\$7,500.00	\$0.00
	Creditor's Name		2014 Mitsubishi Outlander Sport			
	PO Box 90100	13	As of the date you file, the claim is: Check all that			
	PO Box 90100 Fort Worth, T		apply.			
		X 76101	apply. ☐ Contingent			
	Fort Worth, T	X 76101	apply. ☐ Contingent ☐ Unliquidated			
Who	Fort Worth, T	X 76101 State & Zip Code	apply. ☐ Contingent			
_	Fort Worth, T. Number, Street, City,	X 76101 State & Zip Code	apply. ☐ Contingent ☐ Unliquidated ☐ Disputed	ıred		
	Fort Worth, T. Number, Street, City, o owes the debt?	X 76101 State & Zip Code	apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.	ıred		
	Fort Worth, T Number, Street, City, o owes the debt? (Debtor 1 only	X 76101 State & Zip Code Check one.	apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secu	ıred		
	Fort Worth, T. Number, Street, City, o owes the debt? (Debtor 1 only Debtor 2 only	X 76101 State & Zip Code Check one.	apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secucar loan)	ured		
	Fort Worth, T. Number, Street, City, o owes the debt? (Debtor 1 only Debtor 2 only Debtor 1 and Debtor	X 76101 State & Zip Code Check one. 2 only	apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secucar loan) Statutory lien (such as tax lien, mechanic's lien)	ıred		

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$7,491.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

			Docum	ent Page 24 of	59	•		
Fill i	in this informa	ation to identify your c	ase:					
Deb	tor 1	Vickie Elaine Boyo	I					
		First Name	Middle Name	Last Name				
	tor 2 use if, filing)	First Name	Middle Name	Last Name				
Unit	ed States Banl	kruptcy Court for the:	NORTHERN DISTRIC	CT OF GEORGIA				
Case (if kno	e number						Check i	f this is an ed filing
Offi	cial Form	106E/F						
Scł	nedule E/	F: Creditors W	ho Have Unse	cured Claims				12/15
Sched Sched left. A name	dule G: Executor dule D: Creditor attach the Conti	ory Contracts and Unexpirs Who Have Claims Secu nuation Page to this page ber (if known).	red Leases (Official Forn red by Property. If more s. If you have no informa	 M. Also list executory contract 106G). Do not include any crespace is needed, copy the Partion to report in a Part, do not 	editors with partially s t you need, fill it out,	secured clair number the	ns that ar entries in	e listed in the boxes on the
		of Your PRIORITY Uns						
_	_	s have priority unsecured	claims against you?					
I	☐ No. Go to Pa	rt 2.						
2. L	dentify what type cossible, list the Part 1. If more th	e of claim it is. If a claim has claims in alphabetical order an one creditor holds a par	both priority and nonprior according to the creditor' ticular claim, list the other		and show both priority a	and nonpriorit	y amounts	s. As much as
	roi an explanati	ion of each type of claim, se		form in the instruction booklet.)	Total claim	Priority amount		Nonpriority amount
2.1		Department of Reve	nue Last 4 digits	of account number	\$625.00		\$0.00	\$625.00
	PO Box 1	tcy Section	When was ti	ne debt incurred?		_		
		GA 30321-1108	As of the da	te vou file, the claim is: Check	all that apply			
	Number Stre			te you file, the claim is: Check	all that apply			
	Number Stre	GA 30321-1108 eet City State Zip Code the debt? Check one.	☐ Continger	nt	all that apply			
	Number Stre Who incurred	GA 30321-1108 eet City State Zip Code the debt? Check one.	☐ Continger☐ Unliquida	nt	all that apply			
	Number Stre Who incurred Debtor 1 on Debtor 2 on	GA 30321-1108 eet City State Zip Code the debt? Check one.	☐ Continger☐ Unliquida☐ Disputed	nt	all that apply			
	Number Stre Who incurred Debtor 1 on Debtor 2 on Debtor 1 an	GA 30321-1108 eet City State Zip Code the debt? Check one.	☐ Continger☐ Unliquida☐ Disputed☐ Type of PRIG	nt ted	all that apply			
	Number Stre Who incurred Debtor 1 on Debtor 2 on Debtor 1 an At least one	GA 30321-1108 eet City State Zip Code the debt? Check one. lly ly d Debtor 2 only	☐ Continger ☐ Unliquida ☐ Disputed Type of PRIC ☐ Domestic	nt ted DRITY unsecured claim:				
	Number Stre Who incurred Debtor 1 on Debtor 2 on Debtor 1 an At least one	GA 30321-1108 eet City State Zip Code the debt? Check one. lly lly d Debtor 2 only of the debtors and another	☐ Continger ☐ Unliquida ☐ Disputed Type of PRIC ☐ Domestic ty debt ☐ Taxes an	nt ted DRITY unsecured claim: support obligations	e government			

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Debt	tor 1 Vickie Elaine Boyd		Case number (if known)		
2.2	Internal Revenue Service	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
,	Priority Creditor's Name PO Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is	: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured clain	n:		
	☐ At least one of the debtors and another	☐ Domestic support obligations			
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts you	u owe the government		
	Is the claim subject to offset?	☐ Claims for death or personal injur	y while you were intoxicated		
	■ No	Other. Specify			
	☐ Yes	Notice Only			
Part	2: List All of Your NONPRIORITY Unsecu	red Claims			
3. [Oo any creditors have nonpriority unsecured claim	ns against you?			
Г	☐ No. You have nothing to report in this part. Submit	this form to the court with your other so	hedules		
_	Yes.	and form to the obtain man your care of			
t	.ist all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c han one creditor holds a particular claim, list the other art 2.	laim. For each claim listed, identify what	t type of claim it is. Do not list claims alrea	ady included in Par	t 1. If more
•	u.,			Total clair	m
4.1	American Express	Last 4 digits of account number			\$1,006.00
	Nonpriority Creditor's Name				Ψ1,000.00
	P O Box 981537	When was the debt incurred?	07-07-2016		
	El Paso, TX 79998 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	7.6 of the date you me, the claim	Tio: Oncore all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt		paration agreement or divorce that you did	d not	
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-shar	01 ,		
	Yes	Other. Specify Credit Car	⁻ d		

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Debtor 1 Vickie Elaine Boyd Case number (if known) 4.2 **Auto Credit of Atlanta** Last 4 digits of account number \$0.00 Nonpriority Creditor's Name 375 Franklin Gtwv SE When was the debt incurred? Marietta, GA 30067-7746 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Only ☐ Yes 4.3 **Bank of America** Last 4 digits of account number \$491.00 Nonpriority Creditor's Name P.o. Box 982238 When was the debt incurred? 02-23-2017 El Paso, TX 79998 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other. Specify 4.4 **Buford Finance of Cumming LLC** Last 4 digits of account number \$0.00 Nonpriority Creditor's Name 561 Lakeland Plaza When was the debt incurred? Cumming, GA 30040 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Only ☐ Yes

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Vickie Elaine Boyd	Case number (if known)	
Capital One Bank USA NA	Last 4 digits of account number	\$396.00
Nonpriority Creditor's Name 10700 Capital One Way Glen Allen, VA 23060	When was the debt incurred? 10-07-2015	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card / Charged off	
Comcast	Last 4 digits of account number	\$380.00
Nonpriority Creditor's Name P.O. Box 530099 Atlanta, GA 30353-0099	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Utility	
Credit One Bank	Last 4 digits of account number	\$2,633.00
Nonpriority Creditor's Name PO Box 98872 Las Vegas, NV 89193-8872	When was the debt incurred? 10-29-2015	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other Specify Credit Card / Charged off	

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Case number (if known)

Debto	or 1 Vickie Elaine Boyd	Case number (if known)	
4.8	Crest Financial Services	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name 15 W Scenic Pointe Dr Suite 350	When was the debt incurred?	
	Salt Lake City, UT 84020 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Notice Only	
4.9	Diversified Consultnts Nonpriority Creditor's Name	Last 4 digits of account number	\$367.00
	P.O.Box 551268 Jacksonville, FL 32255	When was the debt incurred? 02-05-2019	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Original Creditor: AT&T Uverse	
4.1	Diversified Consultnts	Last 4 digits of account number	\$69.00
	Nonpriority Creditor's Name P.O.Box 551268	When was the debt incurred? 01-11-2019	
	Jacksonville, FL 32255 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Original Creditor: Dish Network	

Document Page 29 of 59 Debtor 1 Vickie Elaine Boyd Case number (if known) 4.1 \$0.00 **Equifax** Last 4 digits of account number Nonpriority Creditor's Name PO Box 740241 When was the debt incurred? Atlanta, GA 30374-0241 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Only ☐ Yes 4.1 Experian \$0.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 9701 When was the debt incurred? Allen, TX 75013-9701 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Notice Only ☐ Yes 4.1 \$322.00 Gatroenterology Anesthesia 3 Last 4 digits of account number Nonpriority Creditor's Name PO Box 864826 When was the debt incurred? Orlando, FL 32886 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ☐ Unliquidated

debt

■ No ☐ Yes Type of NONPRIORITY unsecured claim:

Medical

☐ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Disputed

☐ Student loans

Other. Specify

report as priority claims

☐ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another

☐ Check if this claim is for a community

Document Page 30 of 59 Debtor 1 Vickie Elaine Boyd Case number (if known) 4.1 \$4,720.00 **GM Financial** Last 4 digits of account number 4 Nonpriority Creditor's Name P.O. Box 181145 When was the debt incurred? 08-11-2012 Arlington, TX 76096 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Prior Repossession ☐ Yes 4.1 LVNV Funding, LLC \$0.00 Last 4 digits of account number Nonpriority Creditor's Name c/o Resurgent Capital Services When was the debt incurred? 55 Beattie PI, Ste 110, MS#402 Greenville, SC 29601 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Notice Only 4.1 **Mariner Finance LLC** \$0.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 8211 Town Center Dr When was the debt incurred? Cartersville, GA 30121 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:

Official Form 106 E/F

debt

■ No

☐ Yes

■ Other. Specify Notice Only

☐ Student loans

report as priority claims

 \square Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

Document Page 31 of 59 Debtor 1 Vickie Elaine Boyd Case number (if known) 4.1 \$1,655.00 **Medical Data Systems Inc** Last 4 digits of account number Nonpriority Creditor's Name 2001 9th Ave STE 312 When was the debt incurred? 03-29-2018 Vero Beach, FL 32960 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other, Specify Original Creditor: Kennestone Hospital ☐ Yes 4.1 Merrick Bank \$0.00 Last 4 digits of account number 8 Nonpriority Creditor's Name PO Box 9201 When was the debt incurred? Old Bethpage, NY 11804 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Notice Only ☐ Yes 4.1 \$0.00 **Pioneer Credit Company** 9 Last 4 digits of account number Nonpriority Creditor's Name 8211 Town Center Dr When was the debt incurred? Nottingham, MD 21236 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Notice Only** Other. Specify

Document Page 32 of 59 Debtor 1 Vickie Elaine Boyd Case number (if known) 4.2 SYNCB/Amazon PLCC \$945.00 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 965015 When was the debt incurred? 11-10-2016 Orlando, FL 32896 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account / Charged off ☐ Yes 4.2 SYNCB/Care Credit \$3,768.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 965036 When was the debt incurred? 02-10-2016 Orlando, FL 32896 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account / Charged off ☐ Yes 4.2 \$0.00 Syncb/JCPenney Last 4 digits of account number Nonpriority Creditor's Name PO Box 965007 When was the debt incurred? Orlando, FL 32896 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated

☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Notice Only** Other. Specify

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Debtor 1 Vickie Elaine Boyd Case number (if known) 4.2 \$0.00 Syncb/Mervyns Last 4 digits of account number 3 Nonpriority Creditor's Name PO Box 965005 When was the debt incurred? Orlando, FL 32896 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Only ☐ Yes 4.2 Syncb/Wal-Mart \$664.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 965024 When was the debt incurred? 11-16-2016 Orlando, FL 32896 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account / Charged off ☐ Yes 4.2 \$578.00 TD Bank USA/Target Credi 5 Last 4 digits of account number Nonpriority Creditor's Name NCD-0450 PO Box 1470 When was the debt incurred? 04-21-2016 Minneapolis, MN 55440 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Credit Card

Document Page 34 of 59 Debtor 1 Vickie Elaine Boyd Case number (if known) 4.2 \$0.00 **Trans Union** Last 4 digits of account number 6 Nonpriority Creditor's Name PO Box 1000 When was the debt incurred? Chester, PA 19022 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Only ☐ Yes 4.2 Wells Fargo Dealer Services \$0.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 1697 When was the debt incurred? Winterville, NC 28590 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Notice Only ☐ Yes 4.2 **World Acceptance Corporation** \$0.00 Last 4 digits of account number 8 Nonpriority Creditor's Name PO Box 6429 When was the debt incurred? Greenville, SC 29606-6429 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ☐ Unliquidated

☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Notice Only

Document Page 35 of 59 Debtor 1 Vickie Elaine Boyd Case number (if known) 4.2 \$248.00 **Xfinity** 9 Last 4 digits of account number Nonpriority Creditor's Name PO Box 2127 When was the debt incurred? Norcross, GA 30091-2127 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utility ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? At&t Uverse Line **4.9** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 5014 Part 2: Creditors with Nonpriority Unsecured Claims Carol Stream, IL 60197-5014 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Dish Network** Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 105169 ■ Part 2: Creditors with Nonpriority Unsecured Claims Atlanta, GA 30348-5169 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Kennestone Hospital Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO BOx 406161 Part 2: Creditors with Nonpriority Unsecured Claims Atlanta, GA 30384 Last 4 digits of account number Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 625.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 625.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 18,242.00

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Debtor 1 Vickie Elaine Boyd

Total Nonpriority. Add lines 6f through 6i.

6j. 18,242.00 Case 19-40997-bem Doc 1 Filed 04/30/19 Entered 04/30/19 09:32:06 Desc Main

Debtor 1 Vickie Elaine Boyd
First Name Middle Name Last Name
Debtor 2
(Spouse if, filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA
Construction
Case number
(i. a.c.,)

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			<u>—</u>
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	Number	Street			
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

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		Docume	nt Page 38 of :	<u>59 </u>
Fill in th	is information to identify your	case:		
Debtor 1	Vickie Elaine Boy	rd		
	First Name	Middle Name	Last Name	
Debtor 2		Middle News	Last Name	
(Spouse if,	filing) First Name	Middle Name	Last Name	
United S	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA	
Case nui	mber			
(if known)		 -		☐ Check if this is an
				amended filing
∩ffi⊲i	al Form 106H			
		.1.4		
<u>Sche</u>	dule H: Your Cod	ebtors		12/15
ill it out, our nam	and number the entries in the ne and case number (if known)	boxes on the left. Attach . Answer every question	the Additional Page to t	n. If more space is needed, copy the Additional Page, this page. On the top of any Additional Pages, write
1. D	o you have any codebtors? (If	you are ming a joint case, o	do not list either spouse as	s a codebior.
	0			
■ Y	es			
	ithin the last 8 years, have you ona, California, Idaho, Louisiana,			(Community property states and territories include ton, and Wisconsin.)
	o. Go to line 3. es. Did your spouse, former spot	use, or legal equivalent live	e with you at the time?	
in lir Forn	ne 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make sui	your spouse is filing with you. List the person showr re you have listed the creditor on Schedule D (Officia 6). Use Schedule D, Schedule E/F, or Schedule G to fi
	Column 1: Your codebtor Name, Number, Street, City, State and Zi	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1	Cecil Benson Millwood			☐ Schedule D, line
	1950 Vicki Trail			Schedule E/F, line 4.14
	Cumming, GA 30041			☐ Schedule G
				GM Financial
3.2	Cecil Benson Millwood			■ Schedule D, line 2.1
٠.ــ	1950 Vicki Trail			☐ Schedule E/F, line
	Cumming, GA 30040			☐ Schedule E/F, lifte
				Chase Auto Finance

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EIII	in this information to identi	ify your case	·				1					
		ie Elaine E										
	otor 2 buse, if filing)					_						
Uni	ted States Bankruptcy Cou	urt for the:	NORTHERN DISTRIC	T OF GEORGIA								
(If kr	se number						☐ An					hapter
	fficial Form 106	_					M	M / DD/ Y	YYY			
S	chedule I: You	r Incor	ne									12/15
spo atta	plying correct informatio use. If you are separated ch a separate sheet to the table to the Describe Employment	and your s is form. On loyment	pouse is not filing wi	th you, do not includ	de inforr	natio	on about	your spo	use. If mo	re spa	ace is ne	eded,
	information.			Debtor 1				Debtor 2	or non-fil	ing sp	ouse	
	If you have more than on attach a separate page w		Employment status	■ Employed				☐ Emplo	•			
	information about additio employers.			☐ Not employed				☐ Not ei	mployed			
			Occupation	Bus Driver								
	Include part-time, seasor self-employed work.	nai, or E	Employer's name	Cobb County So	hool D	istri	ict					
	Occupation may include or homemaker, if it applies		Employer's address	PO Box 1288 Marietta, GA 300	061							
		H	low long employed th	nere? 15 years	s							
Par	t 2: Give Details Ab	bout Month	ly Income									
	mate monthly income as use unless you are separat		you file this form. If y	ou have nothing to re	port for	any l	line, write	\$0 in the	space. Inc	lude yo	our non-f	filing
	u or your non-filing spouse e space, attach a separate			mbine the information	n for all e	mplo	oyers for th	nat perso	n on the lir	nes belo	ow. If yo	u need
							For Debt	tor 1	For Deb			
2.	List monthly gross wag deductions). If not paid r				2.	\$	2,5	514.00	\$		N/A	
3.	Estimate and list month	hly overtime	e pay.		3.	+\$		0.00	+\$		N/A	

Official Form 106I Schedule I: Your Income page 1

Calculate gross Income. Add line 2 + line 3.

\$ 2,514.00

N/A

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Debt	or 1	Vickie Elaine Boyd	=:	(Case r	number (<i>if k</i>	nown)				
					For	Debtor 1			Debtor:		
	Cop	by line 4 here	4.		\$	2,51	4.00	\$		N/A	<u> </u>
5.	List	t all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58	а.	\$	44	0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$		0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50	Э.	\$	25	9.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	50	d.	\$	(0.00	\$		N/A	_
	5e.	Insurance	56		\$		8.00	\$		N/A	_
	5f.	Domestic support obligations	5f		\$		0.00	\$		N/A	_
	5g.	Union dues	50	-	\$		0.00	—		N/A	_
	5h.	Other deductions. Specify:	_	า.+	\$			+ \$		N/A	_
6.		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$		7.00	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,57	7.00	\$		N/A	_
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88		\$		0.00	\$		N/A	
	8b.	Interest and dividends	8b		\$ 		0.00	\$		N/A N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$ \$		0.00	* \$		N/A	_
	8d.	Unemployment compensation	80	d.	\$		0.00	\$		N/A	_
	8e.	Social Security	86	€.	\$		0.00	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$		0.00	\$		N/A	_
	8g.	Pension or retirement income	80	_	\$		0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8r	า.+	\$		0.00	+ 5		N/A	<u></u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S		0.00	\$		N/A	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	1	,577.00	+ \$		N/A	= \$	1,577.00
		If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_	•	,577.00			11//	- [•] -	1,077.00
11.	Star Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	dep			•			chedule		0.00
12.		d the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certaillies							12.	\$	1,577.00
13.	_	you expect an increase or decrease within the year after you file this form	?							Combi month	ned ly income
		No.									

Official Form 106l Schedule I: Your Income page 2

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	in this informa	ation to identify yo	oni case.	<u> </u>						
	tor 1					Ck	sook.	if this is:		
Den	tor r	Vickie Elaine	э воуа					n amended filing		
Deb	tor 2							•	ving postpetition cha	anter
	ouse, if filing)								the following date:	дртог
Unit	ed States Bankı	ruptcy Court for the	: NORTH	IERN DISTRICT OF GEO	RGIA		M	IM / DD / YYYY		
	e number nown)									
Of	fficial Fo	rm 106J								
Sc	chedule	J: Your	Exper	ses						12/15
info nun	ormation. If manual moder (if know	nore space is ne n). Answer eve	eded, atta ry question	If two married people ar ch another sheet to this n.						
1.	t 1: Desci	ribe Your House	enoia							
	No. Go to									
		es Debtor 2 live	in a sonar	ata housahold?						
	□ res. Do c		iii a sepaii	ate nousenoia:						
	= '		st file Offici	al Form 106J-2, Expenses	s for Separate Housel	hold of D	ebto	r 2.		
2	Do you hav	e dependents?	=		•					
2.	•	•	■ No							
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		_	Dependent's age	Does dependent live with you?	ı
	Do not state	the							□ No	•
	dependents	names.							☐ Yes	
									☐ No	
									☐ Yes	
									□ No	
									☐ Yes	
									□ No	
3.	Do your exi	penses include	_						☐ Yes	
0.	expenses o	f people other t d your depende	han $_{m au}$	No Yes						
Par		ate Your Ongoi								
exp				uptcy filing date unless y y is filed. If this is a supp						
				government assistance i						
	ficial Form 10		a nave me	nadea it on conedate i. I	our moome			Your expe	enses	
4.		or home owners		ses for your residence. I r lot.	nclude first mortgage		\$		725.00	
	If not include	ded in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
		erty, homeowner's	s, or renter	's insurance		4b.			0.00	
		•		pkeep expenses		4c.	\$		0.00	
		owner's associat				4d.			0.00	
5.	Additional ı	mortgage paym	ents for yo	our residence, such as ho	me equity loans	5.	\$		0.00	

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Debtor 1	Vickie Elaine Boyd	Case num	ber (if known)	
6. Uti l	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	81.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
6d.	Other. Specify: Cell Phone	6d.	\$	232.00
	Cable/Internet		\$	80.00
. Foo	od and housekeeping supplies		\$	250.00
	Idcare and children's education costs	8.	\$	0.00
	thing, laundry, and dry cleaning	9.	·	0.00
	sonal care products and services	10.		0.00
	dical and dental expenses	11.		20.00
	nsportation. Include gas, maintenance, bus or train fare.		<u> </u>	20.00
	not include car payments.	12.	\$	80.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	aritable contributions and religious donations	14.	\$	0.00
	urance.		·	
Do	not include insurance deducted from your pay or included in lines 4 or 20.			
15a	. Life insurance	15a.	\$	0.00
15b	. Health insurance	15b.	\$	0.00
150	. Vehicle insurance	15c.	\$	109.00
150	l. Other insurance. Specify:	15d.	\$	0.00
	tes. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify:	 16.	\$	0.00
7. Ins	tallment or lease payments:			
17a	. Car payments for Vehicle 1	17a.	\$	0.00
17b	. Car payments for Vehicle 2	17b.	\$	0.00
17c	. Other. Specify:	17c.	\$	0.00
	l. Other. Specify:	17d.	\$	0.00
	ar payments of alimony, maintenance, and support that you did not report as lucted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	 18.	\$	0.00
	per payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.	· 	
	er real property expenses not included in lines 4 or 5 of this form or on Sche		our Income.	
	. Mortgages on other property	20a.		0.00
20b	. Real estate taxes	20b.	\$	0.00
200	Property, homeowner's, or renter's insurance	20c.	\$	0.00
200	l. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	. Homeowner's association or condominium dues	20e.	· -	0.00
	er: Specify:		+\$	0.00
	· · -			0.00
	culate your monthly expenses			
	. Add lines 4 through 21.		\$	1,577.00
22b	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
220	. Add line 22a and 22b. The result is your monthly expenses.		\$	1,577.00
3. Cal	culate your monthly net income.			
23a	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,577.00
	Copy your monthly expenses from line 22c above.	23b.	-\$	1,577.00
				·
230	Subtract your monthly expenses from your monthly income.	00.	•	0.00
	The result is your monthly net income.	23c.	\$	0.00
For	you expect an increase or decrease in your expenses within the year after yo example, do you expect to finish paying for your car loan within the year or do you expect your lification to the terms of your mortgage? No.			or decrease because of a
П,	Voc Explain here:			

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Fill in this inform	nation to identify your	case:		
Debtor 1	Vickie Elaine Boy	d		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DIST	FRICT OF GEORGIA	
	initiapito) Court for the	TOTAL PIO	THE ST SECRET	
Case number				☐ Check if this is an amended filing
Official Fo		n for Indiv	riduals Filing Under Chapte	r 7 12/15
	vidual filing under cha	-	I out this form if:	
you have lease You must file this	ed personal property a s form with the court w ver is earlier, unless th	nd the lease has n ithin 30 days after	ot expired. you file your bankruptcy petition or by the date set e time for cause. You must also send copies to the	
	eople are filing together ad date the form.	in a joint case, bo	th are equally responsible for supplying correct in	formation. Both debtors must
	and accurate as possib our name and case nur		s needed, attach a separate sheet to this form. On t	he top of any additional pages,
Part 1: List Va	our Craditors Who Have	a Sacurad Claims		
	our Creditors Who Have			
1. For any creditor information be	•	art 1 of Schedule D	: Creditors Who Have Claims Secured by Property	(Official Form 106D), fill in the
	editor and the property t	hat is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's C	hase Auto Finance		■ Surrender the property.	■ No
name:			☐ Retain the property and redeem it.	
Description of	2014 Mitsubishi O	ıtlander Sport	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:			Retain the property and [explain]:	
				_
For any unexpire		ase that you listed	in Schedule G: Executory Contracts and Unexpired expired leases are leases that are still in effect; the	
			the trustee does not assume it. 11 U.S.C. § 365(p)(2	
Describe your u	nexpired personal prop	perty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of lea	ased			□ INU
Property:				☐ Yes
Lessor's name:	anad			□ No
Description of lea Property:	aseu			☐ Yes
Lessor's name:				□ No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Debtor	1 Vi o	ckie Elaine Boyd	Case number (if known)	
Descrip Propert	ption of	leased		☐ Yes
Lessor'	's name			□ No
Descrip Propert	ption of ty:	leased		☐ Yes
	's name			□ No
Propert				☐ Yes
	's name ption of			□ No
Propert	•	loudou		☐ Yes
	's name			□ No
Propert	ption of ty:	ieased		☐ Yes
Part 3:	Sigr	n Below		
		of perjury, I declare that I have indicated m s subject to an unexpired lease.	y intention about any property of my estate that se	cures a debt and any personal
		e Elaine Boyd	x	
		Elaine Boyd e of Debtor 1	Signature of Debtor 2	
Da	ate	April 30, 2019	Date	

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		B 00001110		
Fill in this infor	mation to identify your	case:		
Debtor 1	Vickie Elaine Boy	rd		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA	
Case number				
(if known)				Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	49,951.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	49,951.00
Paı	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	7,491.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	625.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	18,242.00
	Your total liabilities	\$	26,358.00
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,577.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,577.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	nedules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Vickie Elaine Boyd

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,514.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	625.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	625.00

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Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20	Fill in this info	rmation to identify your	2250:		
Pirst Name Middle Name Last Name					
Debtor 2 (Spouse f, filling) First Name Middle Name Last Name	Debtor 1			Last Namo	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA Case number (if known)	Debtor 2	Filst Name	Middle Name	Last Name	
Case number (If known) Check if this is an amended filing		First Name	Middle Name	Last Name	
Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filling together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Vickie Elaine Boyd Signature of Debtor 1	United States E	Bankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA	
Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filling together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Vickie Elaine Boyd Signature of Debtor 1	Case number				
Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X Isl Vickle Elaine Boyd Signature of Debtor 1					☐ Check if this is an
Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Vickie Elaine Boyd Signature of Debtor 1					amended filing
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Vickie Elaine Boyd Vickie Elaine Boyd Signature of Debtor 1	You must file the obtaining mone	nis form whenever you fi ey or property by fraud ir	le bankruptcy schedules n connection with a bank	or amended schedules. N	Making a false statement, concealing property, or
■ No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Vickie Elaine Boyd Vickie Elaine Boyd Signature of Debtor 1	Sig	gn Below			
Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Vickie Elaine Boyd Vickie Elaine Boyd Signature of Debtor 1	Did you p	pay or agree to pay some	one who is NOT an attor	ney to help you fill out bar	nkruptcy forms?
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Vickie Elaine Boyd Vickie Elaine Boyd Signature of Debtor 1	■ No				
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Vickie Elaine Boyd Vickie Elaine Boyd Signature of Debtor 1	☐ Yes.	Name of person			
that they are true and correct. X /s/ Vickie Elaine Boyd Vickie Elaine Boyd Signature of Debtor 1 X Signature of Debtor 2					200.diadon, and olgnature (oliniar form 110)
Vickie Elaine Boyd Signature of Debtor 2 Signature of Debtor 1			that I have read the sum	mary and schedules filed	with this declaration and
Vickie Elaine Boyd Signature of Debtor 2 Signature of Debtor 1	X /s/ Vid	ckie Elaine Bovd		X	
Date April 30, 2019 Date	Vickie	e Elaine Boyd		Signature of De	Debtor 2
	Date	April 30, 2019		Date	

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Georgia

In re	Vickie Elaine Boyd		Case No.	
	-	Debtor(s)	Chapter	7
	DISCLOSURE OF C	COMPENSATION OF ATTOR	NEY FOR DI	EBTOR(S)
С	Pursuant to 11 U.S.C. § 329(a) and Fed. Ban compensation paid to me within one year before rendered on behalf of the debtor(s) in cont	ore the filing of the petition in bankruptcy, or	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to acce	pt	\$	1,625.00
	Prior to the filing of this statement I hav	e received	\$	225.00
				1,400.00
2. 1	The source of the compensation paid to me w	vas:		
	✓ Debtor ☐ Other (specify):			
3. Т	The source of compensation to be paid to me	is:		
	✓ Debtor	Debtor shall pay \$200 per month beginn on post-petition attorney fees.	ning May 2019 for a	a period of 7 months for payment
4.	✓ I have not agreed to share the above-disc	losed compensation with any other person u	nless they are mem	bers and associates of my law firm.
[d compensation with a person or persons what of the names of the people sharing in the c		
5. 1	In return for the above-disclosed fee, I have a	agreed to render legal service for all aspects	of the bankruptcy of	case, including:
b c		edules, statement of affairs and plan which r g of creditors and confirmation hearing, and ditors to reduce to market value; exer applications as needed; preparation a	may be required; I any adjourned hea mption planning;	rings thereof; preparation and filing of
6. E	By agreement with the debtor(s), the above-d Representation of the debtors		service:	
		CERTIFICATION		
	certify that the foregoing is a complete state ankruptcy proceeding.	ement of any agreement or arrangement for p	payment to me for r	epresentation of the debtor(s) in
Αı	pril 16, 2019	/s/ Jeffrey B. Kelly		
	ate	Jeffrey B. Kelly 41: Signature of Attorney Law Office of Jeffr 107 E. 5th Avenue	2798 ey B. Kelly, P.C.	

Rome, GA 30161 678-861-1127

Name of law firm

lawoffice@kellycanhelp.com

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United States Bankruptcy Court Northern District of Georgia

Northern District of Georgia										
In re	Vickie Elaine Boyd		Case No.							
_	•	Debtor(s)	Chapter	7						
VERIFICATION OF CREDITOR MATRIX										
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.										
Date:	April 30, 2019	/s/ Vickie Elaine Boyd								
_		Vickie Elaine Boyd								

Signature of Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
_	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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Fill ir	n this infor	mation to identify your case:					irected in this form and	in Form
Debt	or 1	Vickie Elaine Boyd		122	2A-1Sup	p:		
Debt (Spou	or 2 se, if filing)				■ 1. The	ere is no pres	umption of abuse	
Unite	ed States E	Bankruptcy Court for the: Northern District of	Georgia				o determine if a presur	•
Coor	numbor						nade under <i>Chapter 7</i> icial Form 122A-2).	Means Test
(if kno	e number wn)			_			does not apply now be service but it could ap	
					☐ Che	ck if this is a	n amended filing	
Off	icial F	orm 122A - 1					· ·	
		7 Statement of Your Cur	rent Mor	nthly Inc	ome			12/15
attach case r	a separate number (if I ying militar	and accurate as possible. If two married people and exhet to this form. Include the line number to will known). If you believe that you are exempted from y service, complete and file Statement of Exempted Iculate Your Current Monthly Income	nich the additior a presumption	nal information a of abuse becau	applies. C se you do	n the top of a	ny additional pages, writen narily consumer debts o	te your name and or because of
1.	What is y	our marital and filing status? Check one onl	y.					
	■ Not ma	arried. Fill out Column A, lines 2-11.						
	☐ Marrie	d and your spouse is filing with you. Fill ou	both Columns	A and B, lines	2-11.			
	☐ Marrie	ed and your spouse is NOT filing with you. \	ou and your s	spouse are:				
	☐ Livi	ng in the same household and are not legal	ly separated.	Fill out both Co	lumns A	and B, lines 2	2-11.	
	per	ng separately or are legally separated. Fill on alty of perjury that you and your spouse are leng apart for reasons that do not include evading.	gally separated	d under nonban	kruptcy l	aw that applie	es or that you and your	
10 the	1(10A). For e 6 months,	erage monthly income that you received from all sexample, if you are filing on September 15, the 6-month and the income for all 6 months and divide the total lethe same rental property, put the income from that property	onth period would by 6. Fill in the res	be March 1 throusult. Do not include	ugh Augus de any inc	st 31. If the amo	ount of your monthly incon ore than once. For examp	ne varied during le, if both
					Column Debtor		Column B Debtor 2 or non-filing spouse	
2.	Your gros	ss wages, salary, tips, bonuses, overtime, a ductions).	nd commissio	ons (before all	\$	2,514.00	\$	
3.		and maintenance payments. Do not include pairs filled in.	payments from	a spouse if	\$	0.00	\$	
	of you or from an up and room	nts from any source which are regularly pa your dependents, including child support. nmarried partner, members of your household, mates. Include regular contributions from a spo to not include payments you listed on line 3.	Include regular your depende	contributions nts, parents,	\$	0.00	\$	
5.	Net incor	ne from operating a business, profession, o		14				
	0	state (hafana all da donttara)	\$ 0.00	tor 1				
		eipts (before all deductions)	-\$ 0.00					
1	-	and necessary operating expenses nly income from a business, profession, or farn		Copy here ->	\$	0.00	\$	
1		ne from rental and other real property	Ψ	.,			·	
		and the property	Deb	tor 1				
	Gross rec	eipts (before all deductions)	\$ 0.00					
	Ordinary a	and necessary operating expenses	-\$ 0.00					
	Net month	nly income from rental or other real property	\$0.00	Copy here ->	-	0.00	\$	
7.	Interest,	dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

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Debtor 1 Vickie Elaine Boyd Case number (if known)

			Colum Debto				nn B or 2 or iling spo	ouse	
8. Unemployment compensation			\$		0.00	\$			
Do not enter the amount if you contend that the amoun the Social Security Act. Instead, list it here:	t received was a bene	efit under							
For you \$	0	.00							
For your spouse \$									
9. Pension or retirement income. Do not include any an benefit under the Social Security Act.			\$		0.00	\$			
10. Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below.	Security Act or payme manity, or internationa	nts al or	•			Φ.			
•			\$		0.00	\$			
Total amounts from concrete nages if any			ф		0.00	\$ \$			
Total amounts from separate pages, if any.			Φ		0.00	Φ			
 Calculate your total current monthly income. Add lir each column. Then add the total for Column A to the to 		\$	2,514.	00_	+ \$ _		_ =	\$	2,514.00
								Total	current monthly
Part 2: Determine Whether the Means Test Applies t	o You								
12. Calculate your current monthly income for the year	. Follow these steps:								
12a. Copy your total current monthly income from line	11			Сору	line 11 l	nere=>	!	\$	2,514.00
Multiply by 12 (the number of months in a year)							L	Х	12
12b. The result is your annual income for this part of the	e form						12b.	\$	30,168.00
13. Calculate the median family income that applies to	you. Follow these ste	ps:					L		
Fill in the state in which you live.	GA								
Fill in the number of people in your household.	1						Г		
Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link	specified					13.	\$	47,953.00
14. How do the lines compare?									
14a. Line 12b is less than or equal to line 13. O	n the top of page 1, c	heck box	1, <i>The</i>	re is n	o presun	nption of	abuse.		
14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	2, The pre	esumpt	ion of a	abuse is	determir	ned by F	orm 1	22A-2.
Part 3: Sign Below									
By signing here, I declare under penalty of perjury	that the information of	on this sta	atemen	t and ii	n any atta	achment	s is true	and c	orrect.
X /s/ Vickie Elaine Boyd									
Vickie Elaine Boyd Signature of Debtor 1									
Date April 30, 2019 MM / DD / YYYY									
If you checked line 14a, do NOT fill out or file Forr	n 122A-2.								
If you checked line 14b, fill out Form 122A-2 and f									

American Express P O Box 981537 El Paso, TX 79998

At&t Uverse PO Box 5014 Carol Stream, IL 60197-5014

Auto Credit of Atlanta 375 Franklin Gtwy SE Marietta, GA 30067-7746

Bank of America P.o. Box 982238 El Paso, TX 79998

Buford Finance of Cumming LLC 561 Lakeland Plaza Cumming, GA 30040

Capital One Bank USA NA 10700 Capital One Way Glen Allen, VA 23060

Cecil Benson Millwood 1950 Vicki Trail Cumming, GA 30041

Cecil Benson Millwood 1950 Vicki Trail Cumming, GA 30040

Chase Auto Finance PO Box 901003 Fort Worth, TX 76101 Comcast P.O. Box 530099 Atlanta, GA 30353-0099

Credit One Bank PO Box 98872 Las Vegas, NV 89193-8872

Crest Financial Services 15 W Scenic Pointe Dr Suite 350 Salt Lake City, UT 84020

Dish Network PO Box 105169 Atlanta, GA 30348-5169

Diversified Consultnts P.O.Box 551268 Jacksonville, FL 32255

Equifax PO Box 740241 Atlanta, GA 30374-0241

Experian PO Box 9701 Allen, TX 75013-9701

Gatroenterology Anesthesia PO Box 864826 Orlando, FL 32886

Georgia Department of Revenue Bankruptcy Section PO Box 161108 Atlanta, GA 30321-1108 GM Financial P.O. Box 181145 Arlington, TX 76096

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Kennestone Hospital PO BOx 406161 Atlanta, GA 30384

LVNV Funding, LLC c/o Resurgent Capital Services 55 Beattie Pl, Ste 110, MS#402 Greenville, SC 29601

Mariner Finance LLC 8211 Town Center Dr Cartersville, GA 30121

Medical Data Systems Inc 2001 9th Ave STE 312 Vero Beach, FL 32960

Merrick Bank PO Box 9201 Old Bethpage, NY 11804

Pioneer Credit Company 8211 Town Center Dr Nottingham, MD 21236

SYNCB/Amazon PLCC PO Box 965015 Orlando, FL 32896

SYNCB/Care Credit PO Box 965036 Orlando, FL 32896

Syncb/JCPenney PO Box 965007 Orlando, FL 32896

Syncb/Mervyns PO Box 965005 Orlando, FL 32896

Syncb/Wal-Mart PO Box 965024 Orlando, FL 32896

TD Bank USA/Target Credi NCD-0450 PO Box 1470 Minneapolis, MN 55440

Trans Union PO Box 1000 Chester, PA 19022

Wells Fargo Dealer Services PO Box 1697 Winterville, NC 28590

World Acceptance Corporation PO Box 6429 Greenville, SC 29606-6429

Xfinity PO Box 2127 Norcross, GA 30091-2127